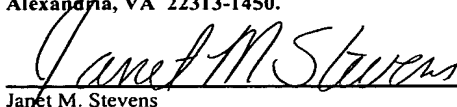


**PATENT AMENDMENT TRANSMITTAL**

(Provisions of 37 CFR 1.136 Apply)

Application Number	10/529,671	<b>I hereby certify that on April 18, 2005 under Express Mail No. EV 40699 2645 US this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 addressed to:</b>  <b>Mail Stop PCT Attention: DO/US Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450.</b>   Janet M. Stevens
International Application No.	PCT/JP03/13060	
International Filing Date	10 October 2003	
Priority Date Claimed	October 10, 2002	
First Named Inventor	Itsuaki KATSUMATA	
Confirmation No.	Unknown	
Attorney Docket No.	789_140	

Transmitted herewith is an Amendment in the above-identified application. The fee has been calculated as follows:

**CLAIMS AS AMENDED**

(1)	(2) Claims Remaining After Amendment	(3)	(4) Highest Number Previously Paid	(5) No. of Extra Claims Present	(6) Rate (Large Entity)	(7) Additional Fee
TOTAL CLAIMS	5	MINUS	20	0	\$ 50.00	\$00.00
INDEPENDENT CLAIMS	1	MINUS	3	0	\$ 200.00	\$00.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>						<b>\$00.00</b>

**EXTENSION OF TERM**

☒ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

☐ This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above-identified application. The requested extension and appropriate non-small entity fee are as follows:

- |   |            |  |
|---|------------|--|
| <input type="checkbox"/> One Month (37 CFR 1.17(a)(1) .....   | \$120.00   |  |
| <input type="checkbox"/> Two Month (37 CFR 1.17(a)(2) .....   | \$450.00   |  |
| <input type="checkbox"/> Three Month (37 CFR 1.17(a)(3) ..... | \$1,020.00 |  |

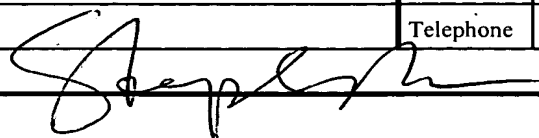
**TOTAL FEES DUE**

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount is reduced by one-half, and the resulting fee is:

**FEE PAYMENT**

- ☒ No additional fee is required. ☐ A check in the amount of \$ is enclosed.
- ☐ Charge Deposit Account 50-1446 in the amount of \$\_\_\_\_\_. Enclosed is a duplicate copy of this sheet.
- ☒ Please charge any fees which may be required, or credit any overpayment, to Deposit Account 50-1446.

**Submitted By:**

Name (Print Type)	Stephen P. Burr	Reg. No.	32,970	Customer No.	025191
		Telephone	(315) 233-8300	Facsimile	(315) 233-8320
Signature				Date	April 18, 2005